Effective October 1, 2003 09/552 272													72		
		CLAIMS		S FILED - PART I (Column 1) (Column 2)				SMALL ENTITY TYPE				ОТ	HEI	R THAN	
II	TOTAL CLAIMS						1	R/A	TE	FE		RA		FEE	
	FOR	NUM	NUMBER FILED .		NUMBER EXTRA		 	C FEE	 	{	RBASIC		 		
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•	If the differen	nce in column 1	is less tha	less than zero, enter "0" in co			•	+14 TOT			 `	R +290			4
	0	Column 1		MENDED - PART II(Column 2) (Column 3)					- 1			отн	IER	THAN	1
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of 1	the "Highest Nun	nber Previously Pai nber Previously Pai per Previously Paid	d For" IN THI id For" IN THI	S SPACE is less S SPACE is less	than 2	0, enter *20.*		TOTAL OIT. FEE		-		TOTAL DDIT, FEE			-
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